UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re:	Case No. 17 B 23922
Mae O Edwards	
Debtor(s)	

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Marilyn O. Marshall, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 08/10/2017.
- 2) The plan was confirmed on 10/17/2017.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. \S 1329 on NA .
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on 07/16/2018.
 - 5) The case was Dismissed on 10/02/2018.
 - 6) Number of months from filing to last payment: 13.
 - 7) Number of months case was pending: <u>19</u>.
 - 8) Total value of assets abandoned by court order: <u>NA</u>.
 - 9) Total value of assets exempted: NA.
 - 10) Amount of unsecured claims discharged without payment: \$0.00.
 - 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor \$3,455.00 Less amount refunded to debtor \$0.00

NET RECEIPTS: \$3,455.00

Expenses of Administration:

Attorney's Fees Paid Through the Plan \$2,843.28
Court Costs \$0.00
Trustee Expenses & Compensation \$155.43
Other \$0.00

TOTAL EXPENSES OF ADMINISTRATION: \$2,998.71

Attorney fees paid and disclosed by debtor: \$232.00

Scheduled Creditors:						
Creditor	Class	Claim	Claim	Claim	Principal	Int.
Name	Class	Scheduled	Asserted	Allowed	Paid	Paid
Alpha Med Physicians Group	Unsecured	233.00	NA	NA	0.00	0.00
Associated Laboratory Physicians	Unsecured	822.00	NA	NA	0.00	0.00
Bank Of America	Unsecured	3,195.00	3,195.73	3,195.73	0.00	0.00
CarMax Auto Finance	Secured	8,640.00	8,736.56	8,736.56	176.61	279.68
Chase Card	Unsecured	6,312.00	NA	NA	0.00	0.00
Chase Card	Unsecured	5,333.00	NA	NA	0.00	0.00
Citibank	Unsecured	2,095.00	NA	NA	0.00	0.00
Citicards Cbna	Unsecured	1,237.00	NA	NA	0.00	0.00
Comenity Bank/Lane Bryant	Unsecured	1.00	NA	NA	0.00	0.00
Comenity Capital Bank/HSN	Unsecured	46.00	NA	NA	0.00	0.00
Department Stores National Bank	Unsecured	1,487.00	1,487.09	1,487.09	0.00	0.00
Ingalls Memorial Hospital	Unsecured	100.00	NA	NA	0.00	0.00
Midwest Anesthesiologists	Unsecured	1,925.00	NA	NA	0.00	0.00
Palos Health	Unsecured	263.00	NA	NA	0.00	0.00
Quantum3 Group	Unsecured	5,490.00	5,490.55	5,490.55	0.00	0.00
Quantum3 Group	Unsecured	293.00	293.18	293.18	0.00	0.00
Resurgent Capital Services	Unsecured	494.00	494.09	494.09	0.00	0.00
TD Bank USA NA	Unsecured	2,961.00	2,961.50	2,961.50	0.00	0.00
The Hartford / Trumbull Insurance A	Unsecured	315.00	NA	NA	0.00	0.00

Claim	Principal	Interest
Allowed	Paid	<u>Paid</u>
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$8,736.56	\$176.61	\$279.68
\$0.00	\$0.00	\$0.00
\$8,736.56	\$176.61	\$279.68
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$13,922.14	\$0.00	\$0.00
	\$0.00 \$0.00 \$8,736.56 \$0.00 \$8,736.56 \$0.00 \$0.00 \$0.00 \$0.00	Allowed Paid \$0.00 \$0.00 \$0.00 \$0.00 \$8,736.56 \$176.61 \$0.00 \$0.00 \$8,736.56 \$176.61 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

Disbursements:		
Expenses of Administration Disbursements to Creditors	\$2,998.71 \$456.29	
TOTAL DISBURSEMENTS :		<u>\$3,455.00</u>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 03/18/2019

By: /s/ Marilyn O. Marshall

Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.